California State University, Northridge
Information Security Program/Plan
Academic Year 2018/2019
<table>
<thead>
<tr>
<th>Date</th>
<th>Owner</th>
<th>Summary of Action(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2007</td>
<td>Clifford R. Maraschino/ ISO</td>
<td>Created Original Draft</td>
</tr>
<tr>
<td>3/1/2012</td>
<td>Chris Olsen/ ISO</td>
<td>Updates to various sections to bring current. Major updates made to the ‘Priorities for Action’ section.</td>
</tr>
<tr>
<td>5/15/2012</td>
<td>Chris Olsen/ ISO</td>
<td>Reviewed and received approval for the IS Plan with the President and President’s Cabinet.</td>
</tr>
<tr>
<td>12/2013</td>
<td>Chris Olsen/ ISO</td>
<td>Reviewed highlights of IS plan with new university President and Vice President of Information Technology/CIO. This was an interim step taken while developing the annual plan.</td>
</tr>
<tr>
<td>7/18/14</td>
<td>Kevin Krzewinski</td>
<td>Updates to IS Plan</td>
</tr>
<tr>
<td>9/1/14</td>
<td>Hilary Baker</td>
<td>Updates to IS Plan</td>
</tr>
<tr>
<td>10/1/2014</td>
<td>Kevin Krzewinski</td>
<td>Minor formatting updates</td>
</tr>
<tr>
<td>2/1/2014</td>
<td>Kevin Krzewinski</td>
<td>Update the IS Plan for 2016</td>
</tr>
<tr>
<td>11/29/2016</td>
<td>Kevin Krzewinski</td>
<td>Update the IS Plan for 2017</td>
</tr>
<tr>
<td>9/20/2018</td>
<td>Kevin Krzewinski</td>
<td>Update the IS Plan for AY 2018/19</td>
</tr>
</tbody>
</table>
# Table of Contents

1. **Introduction** ........................................................................................................... 4  
   1.1 Guiding Principles ................................................................................................. 4  
   1.2 Scope of the Information Security Program/Plan .................................................. 5  
   1.3 About this Document ............................................................................................. 5  
   1.4 Updates to this Document ..................................................................................... 5  

2. **Roles and Responsibilities** ......................................................................................... 6  

3. **Information Security Policies** .................................................................................. 7  
   3.1 Compliance Requirements ...................................................................................... 7  
   3.2 University Information Security Policy and Standards ......................................... 8  
   3.3 Information Security Practices .............................................................................. 9  
      3.3.1 Information Security Risk Assessment and Vulnerability Management ........ 9  
      3.3.2 Managing Compromises or Breaches of Information Security ....................... 9  
      3.3.3 Employee Education and Training ................................................................. 10  
      3.3.4 Third Party Contractor Requirements ......................................................... 10  

4. **Securing the CSUN Technical Infrastructure** .......................................................... 11  
   4.1 Networking Environment (e.g. data, email and web) ............................................ 11  
   4.2 Enterprise Server Environment ........................................................................... 12  
   4.3 Identity and Access Management ........................................................................ 12  
   4.4 Monitoring and Testing ....................................................................................... 12  

5. **Priorities for Action** .................................................................................................. 13  
   5.1 Goals For Academic Year 2018/2019 .................................................................. 13  

6. **Appendices** ............................................................................................................... 14  
   Appendix A: Glossary of Terms ................................................................................ 14  
   Appendix B: Regulatory Compliance Requirements ............................................... 15  
   Appendix C: Prior Year Goal Attainment Status for Academic Year 2017/2018 ........ 16
1. Introduction
California State University, Northridge (CSUN) is committed to providing a secure and accessible data and networking infrastructure that protects the confidentiality, availability and integrity of information.

The creation, preservation and exchange of information is an intrinsic part of the University's teaching, scholarship and administrative operations. Increasingly that information is processed, handled or stored in electronic form. The growing availability of digital information offers opportunities to improve our collaborations and work in new ways. Unfortunately, it also presents us with new threats. The very technologies we use to gather, share and analyze information also make our institution vulnerable to varied and continually evolving information security risks.

CSUN is entrusted with a wide range of confidential and sensitive information pertaining to our students, faculty staff, donors, and other members of the community (e.g. affiliates). We take seriously our obligation to be stewards of that trust. We are obligated by law and institutional policy to take all reasonable and appropriate steps to protect the confidentiality, availability, privacy, and integrity of information in our custody. This obligation is broad and applies to information in both electronic and material form. Our practices are designed both to prevent the inappropriate disclosure of information and to preserve information in case of intentional or accidental loss.

1.1 Guiding Principles
The University's strategy is multi-faceted and must continue to evolve to meet an ever-changing threat. At the core, the plan is designed to uphold the following principles:

- The University protects the privacy of student, employee, and affiliate records by ensuring the security and protection of confidential and sensitive information in its custody, whether in electronic, paper, or other forms.
- Proper organizational structures and strategies to assure adequate controls and risk assessment are a necessary part of protecting the privacy and confidentiality of information systems. Risk is a fact of life for any organization that must maintain the confidentiality of collected data, whether it is online or consists of paper files. Risk management must include analysis to avoid unnecessary efforts and expenses. Risk is managed on an ongoing basis, as the environment changes, new technology is released, user requirements evolve, or cost-risk factors are further analyzed. Adequate controls not only help mitigate risk but generally correspond to best business practice in assuring transparency and consistency of business processes and effectiveness and availability of underlying technologies.
The continuing education and awareness of the faculty, students, and staff on information security issues is a critical factor in minimizing information security risk overall. In particular, as the University refines its guidelines and procedures for maintaining the confidentiality of information that is deemed highly sensitive, employees who handle this data need to be provided appropriate and periodic training on approved procedure.

1.2 Scope of the Information Security Program/Plan
This Information Security Program and Plan applies to all information that is acquired, transmitted, processed, stored, and/or maintained by CSUN or any CSUN auxiliary organization, whether in digital or paper format. It encompasses all locations in which CSUN information resides including the main campus, remote campus work areas, and hosted environments. It applies to all CSUN faculty, students, employees, consultants, contractors, and any person having access to University information in any form or format.

Information Security plays a leading role in safeguarding the University’s protected data and related systems. However, information security planning and assurance cannot be successfully accomplished solely within the IT division; therefore, the plan outlines the responsibilities of CSUN organizational units and the intersecting responsibilities of other CSUN departments and individuals.

1.3 About this Document
The remainder of this document summarizes CSUN’s current plan to maintain the security of its information assets. It conveys both long-term strategies and near-term activities we are pursuing to improve our overall information security environment. The plan is presented in five sections:

- Roles and Responsibilities
- Information Security Policies and Standards
- Risk Assessment and Mitigation
- Securing the CSUN Technical Infrastructure
- Priorities for Improvement –2018

The document includes in an appendix a glossary of common information security terms.

1.4 Updates to this Document
The document is updated annually and is reviewed by the CIO and President.
2. Roles and Responsibilities

The University assumes a *coordinated approach* to the protection of information resources and repositories of confidential information that are under its custody by establishing appropriate and reasonable administrative, technical and physical safeguards that include all individuals, related units, and others that administer, install, maintain, or make use of CSUN’s computing resources and other depositories of information.

At CSUN, that coordinated approach includes the following administrative structures and responsibilities:

The **Vice President for Information Technology and Chief Information Officer** (VP/CIO) is responsible for the development and implementation of policies and practices that maintain CSUN’s information security and ensuring a periodic review of institutional risks and vulnerabilities. The VP/CIO discusses information security findings and required actions with University leadership, including an annual review of the Information Security Plan (Plan) with the University President and President’s Cabinet.

The **Information Security Officer** (ISO) is responsible for: the development, maintenance, and periodic update of the campus Information Security Plan; the campus-integration, coordination and interpretation of CSU-wide Information Security policies and standards; and development and implementation of more specific guidelines and procedures to support those policies and standards with the particular context of CSUN.

Other ISO duties include:

- Recommend new guidelines, tools, and practices to enhance CSUN’s Information Security posture.
- Coordinate campus IS Risk Assessment.
- Keep current with relevant threats against the campus.
- Coordinate the Security Awareness training
- Facilitate information security planning that promotes secure practices and decreases risk to information and data systems.
- Maintain campus procedures, standards, and guidelines in adherence with CSU information security policies
- Identify and coordinate remediation of weaknesses in CSUN’s infrastructure, data systems, and applications.
The Computer Security Incident Response Team (CSIRT), responds to serious CSUN Information Security incidents, and works with the VP/CIO and ISO to identify incident-remediation plans and makes recommendations to the President and President’s Cabinet on how to reduce future risk and strengthen CSUN’s security posture.

Academic and administrative managers including Vice-Presidents, Deans, Associate Deans, Managers of Academic Resources, Department Chairs, Directors and Managers also play an important role in the overall information security strategy. They are responsible for understanding the importance of managing information security risks both within their organizations and across the campus as a whole, and are ultimately responsible for the protection and use of data/information within their organization. They set an example and establish a tone in their organizations that stresses the importance of information protection, compliance and awareness. They are responsible for classifying, defining controls, authorizing access, monitoring compliance with CSU/campus security policies and standards, and managing risks associated with information assets under their protection. Finally, they are responsible for working with the ISO to mitigate vulnerabilities in their areas and to collaboratively implement good information security practices.

Campus technical staff, both within the IT division and other CSUN divisions, are responsible for the maintenance and protection of systems and applications used to transact or store university data. The duties include but are not limited to adhering to campus security standards, such as those that pertain to system hardening, data sanitization, log/event management, patch management, and password/access controls.

Students, faculty and staff all have the responsibility to remain aware of information security risks, be attentive to sound practices and to report any potential disclosure or loss of information to their supervisors, instructors, or other responsible parties.

3. Information Security Policies
This section highlights the major information security legal requirements that CSUN is bound to uphold and the policies the University have adopted to facilitate compliance. Detailed information on compliance requirements and policies can be found on the University policy web site (http://www-admn.csun.edu/vp/policies/).

3.1 Compliance Requirements
CSUN’s information security practices must comply with a variety of federal and state laws as well as CSU’s and its own campus policies. These laws and policies are generally designed to protect individuals and organizations against the unauthorized disclosure of information that could compromise their identity or privacy. "Level 1 protected data" as defined by the CSU covers a variety of types including personally identifiable information (e.g., social security numbers), personal financial information (e.g., credit card numbers), health information and other confidential information.
Among the laws and regulations that mandate baseline privacy and information security controls, the most notable include the following:

- **Health Insurance Portability and Accountability Act (HIPAA)** - Protective Health Information (PHI) may be used and disclosed for Treatment, Payment, and Healthcare Operations (TPO). The information that is disclosed must meet the “Minimum Necessary” standard. This means the least information required to accomplish the intended purpose. Under all other circumstances except an emergency in a patient’s health, a signed authorization form must be completed by the patient or his legal representative.

- **Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. S1232g; 34 CFR Part 99)** - Protects the privacy of student education records and gives parents certain rights with respect to their children’s education records.

- **Gramm-Leach-Bliley Act (GLBA)** - These requirements mandate the design, implementation, and maintenance of specific policies to protect customer information. The GLBA protects consumers’ personal financial information held by financial institutions.


- **Payment Card Industry (PCI) Data Security Standards** – A framework of standards and compliance-requirements designed to protect consumer payment card data.

Additional laws and regulations apply in the wake of unauthorized disclosure of individuals’ data, requiring the University to take specific actions if any protected data may have been disclosed either accidentally or maliciously to unauthorized parties. A detailed list of regulations and compliance requirements is included in Appendix B. Individuals who handle protected data are encouraged to speak with their managers or the Information Security Officer (ISO) to better familiarize themselves with relevant laws and regulations.

**3.2 University Information Security Policy and Standards**
The university has a body of information security policies that prescribe methods of compliance with relevant laws and regulations as well as generally accepted current best practices. Our policies take the further step of establishing practices to safeguard not only information protected by law, but also information that CSUN leadership has deemed to be of a sufficiently confidential nature that it should be treated as legal protected data.
Detailed information on University policies can be found at:

IS Policies: http://www.csun.edu/afvp/university-policies-procedures
IS Standards and Guidelines: http://www.csun.edu/it/information-security-standards

3.3 Information Security Practices
Our information security plan is further enabled by three core practices:

- Risk assessment and vulnerability management
- Incident response
- Employee education and training

These practices enable us to proactively identify risks, continuously improve our strategy, and direct our response in case of an information security incident.

3.3.1 Information Security Risk Assessment and Vulnerability Management
In accordance with campus policy, CSUN performs periodic assessments of its information security risks and vulnerabilities. Risk assessments may focus particular types of information, areas of the organization, or technologies. Each year the ISO, in consultation with the VP/CIO and the Cabinet, identifies a set of priorities for information security risk assessments.

The results of risk assessments are shared with the VP/CIO and the Cabinet, together with a plan for implementing specific actions to address risks and vulnerabilities. The ISO is responsible for monitoring the implementation of agreed upon actions and reporting their completion to University leadership.

3.3.2 Managing Compromises or Breaches of Information Security
Planning for incident management involves organizing an Incident Response Team that is responsible for problem identification and resolution. This team has clearly defined membership, roles, and responsibilities, which include, but are not limited to, the following:

a) Incident Management
   - How to trigger a response
   - Automated and manual responses
   - Reporting responsibilities
   - Certification of actions
   - Post-Incident review and recommendations

b) Existing and Evolving Threats

A security incident begins when a security related event is reported to the California State University, Northridge IT Help Center or the IT Information Security Office. When an alert involves personally identifiable information, a cross-functional team of members from different areas of the University will
analyze and recommend the best course of action.

Current members of the Computer Security Incident Response Team (CSIRT) include:

- Information Security Officer (chair)
- VP for Information Technology/Chief Information Officer
- Associate VP, Public Relations
- Associate VP, Human Resources
- Chief of Police
- Internal Auditor
- Director, Risk Management

3.3.3 Employee Education and Training
The entire University Community needs to understand and support the information security objectives of availability, confidentiality and integrity, and what tradeoffs may be necessary for effective control of the information infrastructure’s vulnerabilities. The California State University has established an online information security awareness program to serve all 23 campuses that will promote an ongoing dialogue about information security risks and recommended practices.

CSUN has a multi-pronged approach to training and awareness. Current strategies include the following:

- A privacy and confidentiality agreement signed by all newly hired staff.
- A brief overview of key information security awareness training as part of all new employee hire orientations.
- An online CSU Information Security Awareness Training course for all staff, faculty, and student staff.
- An information security website that serves as a repository of information for CSUN information security standards and guidelines, educational materials, as well as information about current issues/alerts, policies and practices.
- Periodic communiqués to the University community, or targeted audience(s), alerting CSUN students and employees to alert of specific vulnerabilities.
- Presentations and discussions with college management-council groups, new department chair orientations, and other college/department forums.

3.3.4 Third Party Contractor Requirements
The University will require service providers that are permitted access to covered data to provide adequate safeguards. All technology contracts must contain the CSU Supplemental Provisions. Contracts with such service providers will include the following elements regarding data security:
• Explicit acknowledgement that the contract permits the contractor to have access to confidential information
• A definition of the confidential information to which access is granted
• A stipulation that the confidential information must be held in confidence and accessed and used only for the explicit business purpose specified in the contract
• A stipulation from the contractor that it will ensure compliance with the protective conditions specified in the contract
• A provision requiring the contractor to return and/or destroy all confidential information upon completion or termination of the contract
• A stipulation that any violation of the contract’s protective conditions amounts to a material breach of contract and entitles the University to immediately terminate the contract without penalty
• A provision allowing auditing of the contractor’s compliance with protective conditions
• A provision ensuring that the contract’s protective requirements shall survive any termination agreement.

4. Securing the CSUN Technical Infrastructure

This section identifies some of the specific strategies in place to secure the core technology infrastructure (e.g., network, hardware, data center) of the University. It describes some of information security concerns unique to specific technology areas and highlights the measures being employed to secure CSUN infrastructure.

4.1 Networking Environment (e.g. data, email and web)

Among the concerns at CSUN for network and operations security are assurance of service, spam rejection, fraudulent email/phishing-scam processing, copyright protection, appropriate authorization for the use of resources, privacy/confidentiality, protection against unauthorized network access, protecting web sites from typical attacks (e.g. defacement, protected information theft), and maintaining auditable documentation of plans and procedures. The following technologies and tools supported by the appropriate policies, standards, and procedures are implemented to address these needs:

• Internet and Data Center Firewalls, Traffic Monitoring, Intrusion Detection/Prevention Systems
• Virtual Private Network (VPN) and Secure Access Gateways
• Campus-wide Authentication Services including system-wide Federation using Shibboleth
• Desktop Management Systems with Policy Enforcement tools
• Application and Server Security Certificates
• Enterprise Anti-virus/malware and Patch-management systems
- Server, Network, and Application-level Vulnerability Scanning Tools
- Physical and Logical Access Controls to Servers and other Protected Resources
- Confidential network zone to logically separate and protect confidential data systems
- Transport layer encryption for campus technology services such as email, CSUN’s myNorthridge portal, and wireless network.
- Encrypted data-back-ups for enterprise systems with confidential data
- Windows and Apple computer encryption for systems that store/access confidential data.
- Organization of staff to respond to the range of security Issues

4.2 Enterprise Server Environment
Two IT-managed campus data center facilities protect campus servers and storage from unauthorized physical access and assures appropriate logging, data protection and monitoring/alerting. Operational procedures allow physical and logical access only to authorized users and helps ensure that all other staff access servers only to the degree appropriate to their job roles.

4.3 Identity and Access Management
CSUN’s identity management and authentication system ensures appropriate access to all campus computing resources. Network, application, and server access is logged by individual logins to facilitate investigation of possible intrusions or misuse of resources. For applications, only the minimum set of privileges allowed for a user to accomplish his/her objective is granted.

4.4 Monitoring and Testing
Systems and controls are and will continued to be implemented to test and monitor the effectiveness of information security safeguards. Monitoring will be performed to ensure that safeguards are being followed and to detect breakdowns in security. The level and frequency of monitoring will be appropriate to the potential impact and probability of risk identified, and the sensitivity of the information involved. Monitoring may include sampling, system checks, reports of access to systems, reviews of logs, as well as other measure to verify that the CSUN Information Security Program’s controls are working.
5. Priorities for Action
CSUN’s Information Security priorities center on tasks associated with addressing CSUN’s greatest risk areas.

5.1 Goals For Academic Year 2018/2019

- Establish a University wide Data Governance committee that will ensure consistent data management and protection procedures across CSUN.

- Create an anti-phishing education program that will include a self-phishing program to increase the awareness of the dangers of phishing and to reduce the effectiveness of any malicious phishing campaign targeted at CSUN.

- Create a penetration testing program that will decrease the vulnerability of the CSUN network and servers to hackers.

- Transition the security awareness program to the new Chancellor’s Office tool. Increase the compliance to 95%.

- Create a security awareness reporting dashboard that will allow management to proactively manage security training for employees.

- Continue the rollout of tools and procedures that allow Level 1 data users to effectively manage their data

- Add additional applications to CSUN’s dual factor authentication.

- Continue the work with the Chancellor’s Office with the CSU to align Information Security policies to ISO/IEC27001 and ISO/IEC27002.
6. Appendices

Appendix A: Glossary of Terms

**Attacks** are deliberate actions taken by an entity that exploit certain vulnerabilities.

**Authoritative Decision Maker** is the person who made the decision regarding compliance in the referenced section.

**Availability** is a property that assures that the system has the capacity to meet service needs. It includes timeliness and usability. The property of availability protects against threats of denial of service.

**Controls** are mechanisms or procedures that mitigate threats. Among the goals of information security controls are to provide confidentiality, integrity, availability, or privacy to a computer system.

**Confidentiality** is a property that assures the assets of a computer system are accessible only by authorized parties or entities. The property of confidentiality protects a system from the threat of disclosure. A disclosure threat is the possibility that data will be accessed by unauthorized entities.

**Consultants** are experts hired by the university to provide assistance with its information systems or other activities.

**Contracted service providers** are third parties including businesses that are hired by the University to provide assistance with the information systems infrastructure.

**Integrity** is a property that assures that unauthorized changes in data cannot occur or can be detected if they do occur. The property of integrity protects against threats of modification and fabrication.

**Privacy** is a subset of confidentiality. It concerns data about an entity and assures that this data is not made public or is accessible by unauthorized individuals.

**Risk analysis** is the study of the consequences involved in doing something or not doing it. It improves the basis for information security related decisions and helps justify expenditures for information security.

**Threats** are potential occurrences, malicious or otherwise, that can have undesirable effects on assets or resources associated with computer systems.

**Vulnerabilities** are characteristics of systems, applications, and processes that make it possible for a threat to potentially occur. They are not necessarily weaknesses in a system and may be otherwise desirable qualities of a system.
### Appendix B: Regulatory Compliance Requirements

<table>
<thead>
<tr>
<th>Regulation</th>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. S1232g; 34 CFR Part 99)</td>
<td>This protects the privacy of student education records and gives parents certain rights to their children’s education records.</td>
</tr>
<tr>
<td>California State Constitution, Article 1, Section 1</td>
<td>This is a general description of the rights of citizens in California.</td>
</tr>
<tr>
<td>California Penal Code, Section 502</td>
<td>This defines the criminality and responsibility for specific computing activities and associated punishments.</td>
</tr>
<tr>
<td>Gramm-Leach-Bliley Act</td>
<td>GLBA requirements mandate the design, implementation, and maintenance of specific policies to protect customer financial information.</td>
</tr>
<tr>
<td>Federal Trade Commission Regulations (16 CFR, Part 314), Standards for Safeguarding Customer Information; Final Rule, May 23, 2002</td>
<td>This establishes standards for safeguarding customer information and creates a method to guarantee the uniform application of these standards.</td>
</tr>
<tr>
<td>California Business and Professions Code Section 17538.45</td>
<td>This protects electronic mail providers from liability and provides them with a remedy in the event of unauthorized use of email functionality.</td>
</tr>
<tr>
<td>State of California Government Code, Section 11015.5</td>
<td>This law pertains to the confidentiality of electronically collected personal information.</td>
</tr>
<tr>
<td>California Information Practices Act of 1977</td>
<td>This act gives specific direction on how to handle personal information and describes the right to privacy of individuals.</td>
</tr>
<tr>
<td>State of California Government Code, 6254 (j), 6254.4, 6255, 6267</td>
<td>These laws govern the privacy of library users’ records.</td>
</tr>
<tr>
<td>California Education Code 89546, Employee Access to Information Pertaining to Themselves</td>
<td>This summarizes an employee’s rights to review his or her employment records.</td>
</tr>
<tr>
<td>HIPAA (Health Insurance Portability and Accountability Act)</td>
<td>This describes the protection for Health records and accountability for its disclosure.</td>
</tr>
</tbody>
</table>
Appendix C: Prior Year Goal Attainment Status for Academic Year 2017/2018

<table>
<thead>
<tr>
<th>Goal</th>
<th>Status</th>
<th>Progress Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implement a confidential file storage system that can be used by the entire campus</td>
<td>Complete</td>
<td>Confidential Box configuration and provisioning is complete. MFA Complete.</td>
</tr>
<tr>
<td>Continue the rollout of Identity Finder (Spirion) sensitive data management software to the desktops of Level 1 data users and to all servers.</td>
<td>Ongoing</td>
<td>Identity Finder is deployed to 809 desktops and 236 windows servers. IT is in testing with the new version. Rollout to the rest of campus will occur by March,</td>
</tr>
<tr>
<td>Continue whole-disk encryption on end point devices and servers storing confidential data</td>
<td>Ongoing</td>
<td>Whole disk encryption is turned on for approximately 95% of all desktops and laptops that IT manages. Macintosh are in progress.</td>
</tr>
<tr>
<td>Implement multi-factor authentication for all Level 1 users</td>
<td>Ongoing</td>
<td>CFS and Confidential Box is complete. New applications are rolled our quarterly</td>
</tr>
<tr>
<td>Create a risk assessment program that covers all departments with Level 1 data.</td>
<td>Complete</td>
<td>Completed</td>
</tr>
<tr>
<td>Create a server vulnerability management system to allow departmental managers to review current risk profile.</td>
<td>Complete</td>
<td>All known servers are being scanned monthly.</td>
</tr>
<tr>
<td>Create a web site vulnerability management system to allow web site managers and executives to review current risk profile</td>
<td>Complete</td>
<td>We are scanning over 45 web sites on a bi-monthly basis</td>
</tr>
<tr>
<td>Create an endpoint vulnerability management and patching system to allow endpoint managers and executives to review current risk profile</td>
<td>Complete</td>
<td>SCCM and the CSI tool has been deployed to all endpoints. Work needs to be done to refine patching and reporting,</td>
</tr>
<tr>
<td>Align CSUN’s policies and procedures with ISO/IEC27001</td>
<td>Hold</td>
<td>Waiting on CO</td>
</tr>
</tbody>
</table>
On February 16, 2016, the California Attorney General’s Office released a list of safeguards that the CA Attorney General views as constituting reasonable information security practice. CSUN’s incorporation of the Attorney General’s recommendations would support a compelling case we meets the baseline requirements for “reasonable security”. Implementing these guidelines will prevent breaches and also provide safe harbor should a breach occur.

<table>
<thead>
<tr>
<th>Partially Complete</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inventory of Authorized and Unauthorized Devices</td>
<td>Secure Configurations for Hardware and Software</td>
</tr>
<tr>
<td>Continuous Vulnerability Assessment and Remediation</td>
<td>Maintenance, Monitoring, and Analysis of Audit Logs</td>
</tr>
<tr>
<td>Email and Web Browser Protections</td>
<td>Malware Defenses</td>
</tr>
<tr>
<td>Secure Configurations for Network Devices</td>
<td>Controlled Access based on the Need to Know</td>
</tr>
<tr>
<td>Boundary Defense</td>
<td>Account Monitoring and Control</td>
</tr>
<tr>
<td>Data Protection</td>
<td>Incident Response and Management</td>
</tr>
<tr>
<td>Wireless Access Control</td>
<td>Data Recovery Capability</td>
</tr>
<tr>
<td>Security Skills Assessment and Appropriate Training to Fill Application Software Security</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ongoing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Controlled Use of Administrative Privileges</td>
</tr>
<tr>
<td>Limitation and Control of Network Ports</td>
</tr>
<tr>
<td>Penetration Tests and Red Team Exercises</td>
</tr>
</tbody>
</table>